STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY

**PROGRESS SHEET**

COMPUTER INPUT
☐ APPLICATION
☐ PERMIT
☐ CERTIFICATE
☐ OTHER

☑ SURFACE WATER   ☐ GROUND WATER

| NAME Ronald Konopaski | TELEPHONE NO. |
|---|---|

ADDRESS 566 Ninth ave (CITY)   (STATE)   (ZIP CODE)

| ASSIGNED TO San Francisco CA 94118 | TELEPHONE NO. | DATE ASSIGNED |
|---|---|---|

ADDRESS   (CITY)   (STATE)   (ZIP CODE)

| APPLICATION NO. 02-30424 | PERMIT NO. | CERTIFICATION NO. |
|---|---|---|
| DATE AMENDED | DATE CANCELLED | W.R.I.A 19 |

**APPLICATION**

| DATE APPLICATION RECEIVED 8-13-07 | INITIAL $10.00 FEE RECEIVED ☑ YES ☐ NO | DATE FEE RECEIVED |
|---|---|---|
| STATEMENT OF ADDIDTIONAL EXAMINATION FEE $ Addl 2550 Amended to $610 00 | DATE SENT | DATE RECEIVED 11/16/09 |
| DATE RETURNED FOR COMPLETION OR CORRECTION | DATE RECEIVED | |

**TEMPORARY PERMIT**

| APPROVED BY | DATE ISSUED |
|---|---|

**PUBLICATION**

| APPROVED BY | DATE APPROVED | DATE NOTICE SENT |
|---|---|---|

PROTESTED BY AND DATE

| DATE AFFIDAVIT RECEIVED | CHECKED BY | TIME EXPIRED | DATE AMENDED NOTICE SENT | DATE AFFIDAVIT RECEIVED | TIME EXPIRED |
|---|---|---|---|---|---|

**DEPARTMENT OF FISH AND WILDLIFE REPORT**

| APPROVED | PROVISO | PROTEST |
|---|---|---|

**EXAMINATION**

| DATE EXAMINATION MADE | MADE BY | DATE REPORT OF EXAM. WRITTEN | WRITTEN BY | CHECKED BY |
|---|---|---|---|---|
| DATE PERMIT FEE REQUESTED | AMOUNT DUE | DATE RECEIVED | | |

**PERMIT**

| PERMIT APPROVED BY | DATE APPROVED | PERMIT NO. | DATE ISSUED |
|---|---|---|---|

**BEGINNING OF CONSTRUCTION**

| DATE NOTICE SENT | DATE FILED | EXTENSION FEE |
|---|---|---|
| EXTENDED TO | EXTENDED TO | |

**WELL DRILLER'S AND/OR CONSTRUCTION REPORT**

| DATE SENT | DATE FILED |
|---|---|

**COMPLETION OF CONSTRUCTION**

| DATE NOTICE SENT | DATE FILED | EXTENSION FEE |
|---|---|---|
| EXTENDED TO | EXTENDED TO | |

**PROOF OF APPROPRIATION**

| DATE SENT | DATE FILED | EXTENSION FEE | EXTENDED TO |
|---|---|---|---|
| DATE CERTIFICATE FEE REQUESTED | AMOUNT DUE | DATE RECEIVED | DATE APPROVED FOR CERTIFICATE | APPROVED BY |

**CERTIFICATION**

| PROOF EXAM. REQUIRED ☐ YES ☐ NO | CERTIFICATE NUMBER | DATE ISSUED |
|---|---|---|

REMARKS